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GROUP 1800

FAX INFORMATION LOWE, PRICE, LEBLANC & BECKER SUITE 300 99 CANAL CENTER PLAZA ALEXANDRIA, VIRGINIA 22314 (703) 684-1111 FAX: (703) 684-1124

1-22-91

mo.	DATE: <u>Janu</u>	ary 3, 1996
TO:		
NAME: <u>Examiner J. Re</u>	ves	
FIRM: U.S. Patent & T	rademark Office	
LOCATION: Group Art	<u>Unit 1806</u>	
FAX NUMBER: 305-30	305 - 736	<u>ـــــــــــ</u>
NUMBER OF PAGES (I	ncluding cover): 420	
FROM:		
NAME: <u>Demetra J. Mil</u>	ls, Esq.	
RE: Your Reference: _	U.S. Serial No. 08/372,676	
Our Reference: 1	Oocket No. 434-047	
Special Instructions: <u>The attach</u> Examiner interview on January	ed Supplemental Response i 25, 1996. Please forward i	s for consideration prior to an mmediately.
Original will be sent to you:	No	<u>X</u>
	Yes (via mail/air mail)	_
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IMPORTANT

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For confirmation or assistance call (703) 518-5416 and ask for: Drew Herndon

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	SMALL ENTITY	Fee (\$)
Doc. No. <u>434-047</u>	() Information Disclosure Statement W/PTO 1449 and References	
Serial No. 08/372,676	() Assignment and Fee	
	() Certified Priority Doc.(s)	
Applicant:	() Response to Restrict./Elect. Req.	0_
	(Amendment	Ø
Chatterine et al.	() Supplemental/Substitute Declaration	0_
	() Request for Approval of Drawing Revisions	0
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Deposit Account	Deposit Account 12-2237 Initials:	CHAIL INC.

Docket No.: <u>434-047</u>

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Chatterjee et al.

Serial No. 08/372,676

Filed: January 17, 1995

Group Art Unit: 1806

Examiner: Reeves, J.

For:

ANTI-IDIOTYPE MONOCLONAL ANTIBODY 1A7 AND USE FOR THE TREATMENT OF

MELANOMA AND SMALL CELL CARCINOMA

THE COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D. C. 2023!

Dear Sir:

Transmitted herewith is an Amendment in the above identified application.

X] No additional fee is required.

[X] Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.

A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

Also attached:

The fee has been calculated as shown below:

	NO. OF CLAIMS	IIIGIIEST PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	9	20	o	x \$11 =	0
Independent Claims	2	3	0	x \$39 =	0
		If multiple claims newly presented, add \$125.00 Fee for extension of time			
					0
	TOTAL FEE DUE			0.00	

- [] Please charge my Deposit Account No. 12-2237 in the amount of \$. An additional copy of this transmittal sheet is submitted herewith.
- [X] The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment, to Deposit Account No. <u>12-2237</u>, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted.

LOWE, PRICE, LEBLANC & BECKER

Demetra J. Mills

Registration No. 34,506

99 Canal Center Plaza, Suite 300 Alexandria, Virginia 22314 (703) 684-1111 DJM:drh Date: November 8, 1995